This formulary information is prepared for Medicare Formulary plans July 2020 by Melissa Jones 502-724-4605 on 07/28/2020.



EPCLUSA now has the broadest coverage of any pangenotypic regimen*

Kentucky Formulary Table (Select Plans)		
	EPCLUSA	Sofosbuvir/ Velpatasvir (AG of EPCLUSA)
Medicare		
Silverscript Choice	Preferred	Not Covered
HumanaChoice	Preferred	Preferred
Express Scripts Premier Access Medicare PDP	Preferred	Non-Preferred
Anthem MediBlue Plus (KY)	Preferred	Not Covered
Wellcare Classic	Preferred	Not Covered
AARP MedicareRx Preferred	Preferred	Preferred
Humana Basic Rx PDP	Preferred	Preferred

*Based on national covered lives as of February 2020, primarily reflecting in the Commercial and Medicare Part D segments.

This customized reference document includes a selection of regional formulary information from Fingertip Formulary[®] and is current as of 07/28/2020.

Please check with the health plan directly to confirm this formulary information since plans periodically update their policies and many health plans offer more than one formulary.

Exclusive=is on formulary while other DAAs are not, has a lower tier status than other DAAs, or is required in a step therapy process vs other DAAs. Preferred=shares the lowest tier status with at least one DAA. Non-Preferred=another DAA has a lower tier status or is required in a step therapy process. Not Covered=the product is not on the preferred drug list for the health plan. Not Available=formulary status information is not available. The references to company/plan names listed do not, in any manner, imply an endorsement of EPCLUSA or any other products by the referenced companies/plans.

Placement on the formulary is not intended to imply any claims regarding safety, efficacy, or comparability of products.

This list may not be an exhaustive list of all plans in your area. AG=authorized generic; DAA=direct-acting antiviral.

INDICATION

EPCLUSA is indicated for the treatment of adults with chronic hepatitis C virus (HCV) genotype (GT) 1, 2, 3, 4, 5, or 6 infection without cirrhosis or with compensated cirrhosis and in combination with ribavirin for those with decompensated cirrhosis.

IMPORTANT SAFETY INFORMATION

WARNING: RISK OF HEPATITIS B VIRUS REACTIVATION IN PATIENTS COINFECTED WITH HCV AND HBV: Hepatitis B virus (HBV) reactivation has been reported, in some cases resulting in fulminant hepatitis, hepatic failure, and death.

Please see additional Important Safety Information for EPCLUSA, including **BOXED WARNING on Hepatitis B reactivation**, on page 2 and accompanying full Prescribing Information.



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IMPORTANT SAFETY INFORMATION

BOXED WARNING: RISK OF HEPATITIS B VIRUS REACTIVATION IN HCV/HBV COINFECTED PATIENTS

Test all patients for evidence of current or prior hepatitis B virus (HBV) infection before initiating treatment with EPCLUSA. HBV reactivation has been reported in HCV/HBV coinfected patients who were undergoing or had completed treatment with HCV direct-acting antivirals (DAAs) and were not receiving HBV antiviral therapy. Some cases have resulted in fulminant hepatitis, hepatic failure, and death. Cases have been reported in patients who are HBsAg positive, in patients with serologic evidence of resolved HBV, and also in patients receiving certain immunosuppressant or chemotherapeutic agents; the risk of HBV reactivation associated with treatment with HCV DAAs may be increased in patients taking these other agents. Monitor HCV/HBV coinfected patients for hepatitis flare or HBV reactivation during HCV treatment and post-treatment follow-up. Initiate appropriate patient management for HBV infection as clinically indicated.

CONTRAINDICATIONS

• If EPCLUSA is used in combination with ribavirin (RBV), all contraindications, warnings and precautions, in particular pregnancy avoidance, and adverse reactions to RBV also apply. Refer to RBV prescribing information.

WARNINGS AND PRECAUTIONS

- Serious Symptomatic Bradycardia When Coadministered with Amiodarone: Amiodarone is not recommended for use with EPCLUSA due to the risk of symptomatic bradycardia, particularly in patients also taking beta blockers or with underlying cardiac comorbidities and/or with advanced liver disease. A fatal cardiac arrest was reported in a patient taking amiodarone who was coadministered a sofosbuvir-containing regimen. In patients without alternative viable treatment options, cardiac monitoring is recommended. Patients should seek immediate medical evaluation if they develop signs or symptoms of bradycardia.
- Risk of Reduced Therapeutic Effect Due to Concomitant Use of EPCLUSA with P-gp Inducers and/or Moderate to Potent Inducers of CYP2B6, CYP2C8 or CYP3A4: Rifampin, St. John's wort, and carbamazepine are not recommended for use with EPCLUSA as they may significantly decrease sofosbuvir and/or velpatasvir plasma concentrations.

ADVERSE REACTIONS

• The most common adverse reactions (≥10%, all grades) with EPCLUSA were headache and fatigue; and when used with RBV in decompensated cirrhotics were fatigue, anemia, nausea, headache, insomnia, and diarrhea.

DRUG INTERACTIONS

- Coadministration of EPCLUSA is not recommended with topotecan due to increased concentrations of topotecan.
- Coadministration of EPCLUSA is not recommended with proton-pump inhibitors, oxcarbazepine, phenobarbital, phenytoin, rifabutin, rifapentine, efavirenz, and tipranavir/ritonavir due to decreased concentrations of sofosbuvir and/or velpatasvir.

Consult the full Prescribing Information for EPCLUSA for more information on potentially significant drug interactions, including clinical comments.

Please see accompanying full Prescribing Information for EPCLUSA, including **BOXED WARNING**.



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